

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	(Dw)		04-12-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	BZ	897	10-10-01
RESPONSE FORMALITY REVIEW	ns	JC906	01/31/02

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date	Claim	Date	Claim	Date
Final		Original		Final	
1	7-12-01	1	1-16-01	51	
2	1-16-01	2	1-16-01	52	
3	1-16-01	3	1-16-01	53	
4		4		54	
5	✓✓✓	5	✓✓✓	55	
6	✓✓✓	6	✓✓✓	56	
7	✓✓✓	7	✓✓✓	57	
8	✓✓✓	8	✓✓✓	58	
9	✓✓✓	9	✓✓✓	59	
10	N	10	N	60	
11	N	11	N	61	
12	N	12	N	62	
13	✓✓✓	13	✓✓✓	63	
14	N	14	N	64	
15	✓✓	15	✓✓	65	
16	N	16	N	66	
17	✓✓	17	✓✓	67	
18	N	18	N	68	
19	✓✓	19	✓✓	69	
20	N	20	N	70	
21	✓✓	21	✓✓	71	
22	N	22	N	72	
23		23		73	
24		24		74	
25		25		75	
26		26		76	
27		27		77	
28		28		78	
29		29		79	
30		30		80	
31		31		81	
32		32		82	
33		33		83	
34		34		84	
35		35		85	
36		36		86	
37		37		87	
38		38		88	
39		39		89	
40		40		90	
41		41		91	
42		42		92	
43		43		93	
44		44		94	
45		45		95	
46		46		96	
47		47		97	
48		48		98	
49		49		99	
50		50		100	

If more than 150 claims or 10 actions
staple additional sheet here

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